



**FEDERAL REPUBLIC OF NIGERIA**  
**NIGERIA SOCIAL INSURANCE TRUST FUND (NSITF)**  
 (Employees' Compensation Act, 2010)

**Registration of Employer**  
*Section 39(1)*

Mark 'X' as Appropriate

Public/Private Companies [ ] Informal Sector Employer [ ] Partnership [ ]  
 Sole Proprietorship [ ] Others (please specify) [ ]

**PART 1: PARTICULARS OF BUSINESS** (for MDAs, public and private companies):

1.1 Employer Name:

1.2 Incorporation Number:  1.3 Address: Street Number:

Street Name:  City:

Local Govt:  State:

1.4 Postal Address:

1.5 Tel Number:  1.6 Fax Number:

1.7 Email:

1.8 Does Employer operate in other locations? Yes [ ] No [ ]. 1.9 If yes give details: .....

1.10 If yes in 1.9, do you intend to pay contribution centrally? Yes [ ] No [ ].

1.11 Did business start prior to the Act? Yes [ ] No [ ]

**PART 2: PARTICULARS OF OWNER(S) OF ORGANIZATION** (for Partnership & Sole Proprietorship):

2.1 Surname:  Middle Name:

First Name:  Position:

Tel. Number:  Mode of identification: National I.D. [ ] or Drivers Licence [ ] or

International Passport [ ] Specify ID. Number:

**PART 3: BUSINESS SECTOR CATEGORIES:**

Construction  Mining  Banking & Finance  Manufacturing  Aviation

MDAs  Oil & Gas  Agriculture  Energy  Telecom  Others (please specify):.....

**PART 4: DECLARATION BY EMPLOYER OR AUTHORISED PERSON:**

I certify that the above particulars are correct

Signature or Thumb Print: ..... Position: ..... Date: .....

Surname ..... First Name: ..... Official Stamp (if any): .....